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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORN	EY DOCKET NO.	CONFIRMATION NO.
10/553,278 10/13/2005			Masakazu Kawa		SAT-16287		1278
TITLE OF INVENTION: METHOD OF ASSUMING	METHOD OF ASSUM GLIOINT MOMENT O	MING ACTING POINT F BIPED WALKING MO	OF FLOOR REACTION OF FLOOR FLO	ON FORCE TO BIPE	D WALK	ING MOBILE BOI	DY AND
APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	01/07/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
MARC, MCDIEUNEL		3664	700-245000				
1 Change of correspondence address or indication of "Fee Address" (37 CFR 1 363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys				
Change of correspon	idence address (or Cha	nge of Correspondence	or agents OR, alterr	atively,		•	
"Fee Address" indica PT()/SB/47; Rev 03-02 Number is required.	ation for "Fee Address"	" Indication form	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AN	D RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)			. 1 1
PLEASE NOTE: Unles recordation as set forth	is an assignee is ident in 37 CFR 3.11. Comp	ified below, no assignee oletion of this form is NO	data will appear on th T a substitute for filing	e patent. If an assign an assignment.	nce is idei	itified below, the de	ocument has been filed fo
A) NAME OF ASSIGN		(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
HONDA MOTOR CO., LTD.			Tokyo, Jap	/			
Please check the appropria	te assignee category or	categories (will not be pr	rinted on the patent):	Individual 🖸 C	orporation	or other private gro	oup entity Governmen
4a. The following fee(s) ar	e submitted:	4	b. Payment of Fee(s): (Please first reapply a	ny previo	usly paid issue fee	shown above)
☑ 15/sue Foc			A check is enclosed.				
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Advance Order - #	of Copies		overpayment, to L	eposit Account Numl	per 18-0	160 (enclose a	n extra copy of this form).
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interest as shown by the re	cords of the United Su	ates Patent and Trademan	Comee.		ember 21		
Authorized Signature	/David E. Spaw/			Date		AND THE PERSON NAMED IN COLUMN 2 IN COLUMN	The state of the s
Typed or printed name	David E. Spaw	Registration No. 34732 ion is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) 1.1.4. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and we depending upon the individual case. Any comments on the amount of time you require to complete					
This collection of informa an application. Confidenti submitting the completed this form and/or suggestio Box 1450. Alexandria, Virginia 2231 Alexandria, Virginia 2231	ns for reducing this burginia 22313-1450. DO	irden, should be sent to the NOT SEND FEES OR	ne Chief Information O COMPLETED FORM	fficer, U.S. Patent and S TO THIS ADDRES	d Tradema SS. SEND	rk Office, U.S. Dep TO: Commissioner	artment of Commerce, P.C. for Patents, P.O. Box 1450